

Twitter Thread by Kai Kupferschmidt



Kai Kupferschmidt

@kakape



Finally read the new update on UK variant B.1.1.7, posted yesterday, which includes a study suggesting the variant is no more (or less) severe than prior virus variants.

Just a very brief thread (or read the entire document here:

Researchers took 1769 cases of people infected with the new variant and then looked for 1769 cases of people with “normal” virus to compare them to. They chose these so that median age and proportion of females was the same. That’s why it’s called a “matched cohort study”

They then compared hospitalizations for the two groups:

Overall 42 people were hospitalized,

16 with the variant

26 with wild-type

The difference between the two was not significant.

Caveat: “Due to potential time delays for receipt of hospital admissions data, the identified hospital admissions should be regarded as a minimum number of hospital admissions and further admissions data are likely to be received into this NHS dataset in the future.”

The researchers also compared fatality rate for those cases where 28 days had elapsed since sample was taken:

12 of 1430 (0.89%) variant cases had died

10 of 1360 (0.73%) wild-type cases had died

Again, the difference was not significant.

Researchers also checked whether the virus may be more likely to reinfect people.

They found 2 reinfections in the variant group and 3 in the wild-type group.

Again, no significant difference.

They did see one difference: Looking at contact tracing data they found that 15.1% of contacts of variant cases became cases themselves while only 9.8% of contacts of wild-type cases became cases themselves .

Upshot: This is very early days and we will learn a lot more about this variant and its effects, but for now the evidence is pointing to it spreading faster, but not causing more or less severe disease or evading people's immune response to prior infections.

Please remember that a variant that is more transmissible but not more deadly is still a really big problem. It can lead to a lot more illness and death over time if we don't curb its spread.

I'll point you again to Adam's thread: <https://t.co/JEXepxr59P>

Why a SARS-CoV-2 variant that's 50% more transmissible would in general be a much bigger problem than a variant that's 50% more deadly. A short thread... 1/

— Adam Kucharski (@AdamJKucharski) [December 28, 2020](#)

So, yes, it could be a lot worse. But it could also be better.

Stopping this virus has become more difficult than it already was.

We need to keep virus circulation down to limit evolutionary pathways for this virus or our job may become even more difficult.